## Application for Business Trust

It is your responsibility to check for conflicts with federally registered trademarks. The filing of this name does not guarantee exclusive right to nor protection against unauthorized use of this name, (U.C.A. Sections 16-15-103-105) When approved, your Business Trust is registered for 3 years. The last words of the name must be "BUSINESS TRUST". If printed, must be legible.

•	ne:			
4. Registered Office in Ut				
8	Street Address Only	City	State	Zip
5. Registered Agent:	[ ] Check this box if the	e name on line 5 is the agent	t only.	
Print Name of Registered Agent (to whom all mailings will be sent).		Daytime Phone Number	Signature of Registered Age	nt tah
Street Address		Cit		Zip
cnowledge and belief, true, correct, and complete. A  Print Name			Signature	
Street Address		City	Stat	e Zip
BPrint Name		Signature		
Street Address		City	Stat	e Zip
Print Name		Signature		
Street Addr	ess	City	Stat	e Zip

Return fees with two (2) copies of this application to the Division of Corporations. Means of payment are: cash, check, or money order made payable to the "State of Utah". Please include one (1) self addressed envelope with application. If you are faxing you must include, on a cover sheet, the number of a VISA or MasterCard with the date of expiration.

FREE! You may visit our Web Site to access this document and other information.

**Mail In:** PO Box 146705

Salt Lake City, UT 84114-6705

Walk In:160 East 300 South, Main Floor Information Center: (801) 530-4849 Toll Free: (877) 526-3994 (within Utah)

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov